

Gaston County

Gaston County Board of Commissioners www.gastongov.com

DHHS - Community Support Services Division

Board Action

File #: 24-343

Commissioner Brown - DHHS - Community Support Services (Survivor Services) - To Accept and Appropriate Donations Received from April 1, 2024 to June 30, 2024 in the Amount of \$32,469.56

STAFF CONTACT

Gregory Grier - Community Support Services (Survivor Services) - 704-862-6735

BUDGET IMPACT

Appropriate donations. No additional County Funds

BUDGET ORDINANCE IMPACT

Increases donation revenues by \$32,469.56 and appropriate into the respective expense accounts within Survivor Services.

BACKGROUND

Survivor Services received donations during the period of April 1, 2024 to June 30, 2024. The donations rolled into fund balance at June 30, 2024 and need to be appropriated out of fund balance, carried forward, and appropriated into the FY2024-2025 CSS - Survivor Services Budget for the following from the total (\$32,469.56): \$1,067 for Hope United Survivor Network, \$20,554.72 for The Cathy Mabry Cloninger Center, \$2,915.84 for The Lighthouse, \$6,150 in donations for the Thread of Hope initiative and \$1,782 for the Hope for the Holidays initiative.

This Board Action and BCR increases revenues and appropriates unrestricted funds to be used as intended by the donors.

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request (BCR)

DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do herel taken by the Board of Commissioners as follows: –	y certify that the above	is a true	e and corre	ct copy	of action
taken by the Board of Commissioners as follows:	lane and		×5 / *	1 18 1	
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NO. DATE M1 M2 CBrown CCloninger AFraley BHovis KJohnson TKeight RWorley Vote

DISTRIBUTION:

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GASTON COUNTY							
BUDGET CHANGE REQUEST (BCR)							
TO: Dr. Kim S. Eagle, County Manager							
50014		C		7			
FROM:	CSS Survivor Services			J			
	Dept. Code Department Name						
	Grego	ory Grier	7/5/2024]			
	Departme	ent Director	Date				
REQUEST TYPE:	Line-Item Transfer Within Project Transfer Within De Line-Item Transfer Betwee	epartment & Fund	Line-Item Transfer Additional Approp Requires resolution by the Bo	riation of Funds*			
ACCOUNT DESCRIPTION		ACCOUNT NUMBER		AMOUNT**			
As it appears in Munis	Fund-Dant-Div	-Ohi-Proi	Whole dollars only				
Ex. Employee Training	Fund-Dept-Div-SubDiv-Prog-SubProg-Future-Obj-Proj XXXX-XXX-XXXX-XXXXXXXXXXXXXXXXXXXXXXX			Ex. (\$5,000)			
		-00000-000000-0000000-000		Ex. \$5,000			
Fund Balance Appropriated	1000 NDD 000 00000 FDA	mrs 0000000 0000 00 40000		ć (22.450.55)			
Donations: HUSN		.pro-0000000-0000-99-49000 atn-0000000-0000-05-520019		\$ (32,469.56) \$ 1,067.00			
Donations: Shelter	1000-CSS-291-29102-Dona	\$ 1,067.00					
Donations: Shelter Repairs & Maint		atn-0000000-0000-05-520013		\$ 15,010.00			
Donations: CAC		atn-0000000-0000-05-520019		\$ 2,915.84			
Donations: Threads of Hope		Hp-0000000-0000-05-520019	·····	\$ 6,150.00			
Donations: Hope for Holidays	1000-CSS-291-00000-Hope	e4H-0000000-0000-05-52000	7-	\$ 1,782.00			
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		Check c	ell- Amounts must sum to \$0	\$ -			
** Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.							
JUSTIFICATION FOR REQUEST:							
Appropriate donations funds from April 1, 2024 to June 30, 2024 for Hope United Survivor Network, The Cathy Mabry Cloninger Center, and The Lighthouse to expend as needed. The donations rolled into fund balance at June 30, 2024 and need to be appropriated out of fund balance, carried forward and appropriated into the FY2024-2025 CSS - Survivor Services budget in order to be used as intended by donors. All funds are unrestricted.							